

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 06, 2001 8:00 am**  
**Secretary of State**

04-06-2001 90053 049 \*\*\*150.00

0459142

**DOCUMENT # P94000052988**

1. Entity Name

**WINSTON-JAMES CONSTRUCTION, INC.**

Principal Place of Business

Mailing Address

1 CORMORANT CIR  
 DAYTONA BCH FL 32119  
 US

P O BOX 551260  
 JACKSONVILLE FL 32255

2. Principal Place of Business

933 Beville Road

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
 # 103-F

City & State

South Daytona, FL

Zip

32119

Country

Zip

Country

4. FEI Number **59-3255857**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ANSBACHER, LEWIS**  
**5150 BELFORT RD**  
**BLDG 100**  
**JACKSONVILLE FL 32256**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **DPT** ☒ Delete  
 NAME **SCHWARTZ, WINSTON**  
 STREET ADDRESS **1 CORMORANT CIR**  
 CITY-ST-ZIP **DAYTONA BCH FL 32119**

TITLE **DVS** ☒ Delete  
 NAME **ADLEY, JAMES**  
 STREET ADDRESS **1 CORMORANT CIR**  
 CITY-ST-ZIP **DAYTONA BCH FL 32119**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D/PTT** ☐ Change ☒ Addition  
 NAME **Schwartz, Winston**  
 STREET ADDRESS **933 Beville Road #103-F**  
 CITY-ST-ZIP **South Daytona, FL 32119**

TITLE **D/VIS** ☐ Change ☒ Addition  
 NAME **Adley, Jamie**  
 STREET ADDRESS **933 Beville Road #103-F**  
 CITY-ST-ZIP **South Daytona, FL 32119**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Winston D. Schwartz - Pres.  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/01 (904) 760-2555  
 Date Daytime Phone #

CR2E034 (10/00)